

**United States Bankruptcy Court  
District of Puerto Rico**
**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>Costa Dorada Apartments, Corp</b>	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>dba Villas de Costa Dorada</b>	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>EIN: 66-0530335</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State) <b>Calle Emilio Gonzalez #900 Isabela, P.R.</b>	Street Address of Joint Debtor (No. and Street, City, and State)
<b>ZIPCODE</b> <b>00662</b>	<b>ZIPCODE</b>
County of Residence or of the Principal Place of Business: <b>Isabela</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <b>Calle Emilio Gonzalez #900 Isabela, P.R.</b>	Mailing Address of Joint Debtor (if different from street address):
<b>ZIPCODE</b> <b>00662</b>	<b>ZIPCODE</b>

Location of Principal Assets of Business Debtor (if different from street address above):

**ZIPCODE**

<b>Type of Debtor</b> (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other Residential Development Complex  <b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts
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**Filing Fee** (Check one box)

- ☒ Full Filing Fee attached
- ☐ Filing Fee to be paid in installments (Applicable to individuals only) Must attach  
signed application for the court's consideration certifying that the debtor is unable  
to pay fee except in installments. Rule 1006(b). See Official Form No. 3A.
- ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must  
attach signed application for the court's consideration. See Official Form 3B.

**Check one box: Chapter 11 Debtors**

- ☐ Debtor is a small business as defined in 11 U.S.C. § 101(51D)
- ☒ Debtor is not a small business as defined in 11 U.S.C. § 101(51D)
- Check if:**  
☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to  
insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on  
4/01/13 and every three years thereafter).
- Check all applicable boxes**
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or  
more classes, in accordance with 11 U.S.C. § 1126(b).

**Statistical/Administrative Information**

- ☒ Debtor estimates that funds will be available for distribution to unsecured creditors.
- ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for  
distribution to unsecured creditors.

**Estimated Number of Creditors**

☒ 1-49    ☐ 50-99    ☐ 100-199    ☐ 200-999    ☐ 1000-5000    ☐ 5,001-10,000    ☐ 10,001-25,000    ☐ 25,001-50,000    ☐ 50,001-100,000    ☐ Over 100,000

**Estimated Assets**

☐ \$0 to \$50,000    ☐ \$50,001 to \$100,000    ☐ \$100,001 to \$500,000    ☐ \$500,001 to \$1 million    ☐ \$1,000,001 to \$10 million    ☒ \$10,000,001 to \$50 million    ☐ \$50,000,001 to \$100 million    ☐ \$100,000,001 to \$500 million    ☐ \$500,000,001 to \$1 billion    ☐ More than \$1 billion

**Estimated Liabilities**

☐ \$0 to \$50,000    ☐ \$50,001 to \$100,000    ☐ \$100,001 to \$500,000    ☐ \$500,001 to \$1 million    ☒ \$1,000,001 to \$10 million    ☐ \$10,000,001 to \$50 million    ☐ \$50,000,001 to \$100 million    ☐ \$100,000,001 to \$500 million    ☐ \$500,000,001 to \$1 billion    ☐ More than \$1 billion

**THIS SPACE IS FOR  
COURT USE ONLY**

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Costa Dorada Apartments, Corp</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:	
Location Where Filed: <b>N.A.</b>	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).  X _____ Signature of Attorney for Debtor(s) Date	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)  <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes)  <input type="checkbox"/> Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.)  <div style="text-align: center; margin-bottom: 10px;">         _____          (Name of landlord that obtained judgment)       </div> <div style="text-align: center; margin-bottom: 10px;">         _____          (Address of landlord)       </div> <input type="checkbox"/> Debtor claims that under applicable non bankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).			

**Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

Costa Dorada Apartments, Corp

**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.

☐

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

**Signature of Attorney\***

X

Signature of Attorney for Debtor(s)

WIGBERTO LUGO-MENDER 212304

Printed Name of Attorney for Debtor(s)

Wigberto Lugo Mender &amp; Co

Firm Name

Centro Internacional de Mercadeo

Address

Carr 165 Torre I Suite 501 Guaynabo PR 00968

787 707 0404

Telephone Number

May 10, 2011

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

CARLOS R FERNANDEZ RODRIGUEZ

Printed Name of Authorized Individual

President

Title of Authorized Individual

May 10, 2011

Date

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

# Costa Dorada Apartments, Corp.

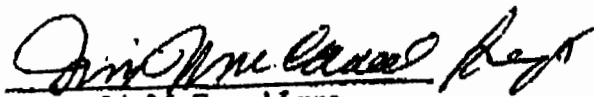
## MINUTA SOBRE RESOLUCION CORPORATIVA

Costa Dorada Apartments, Corp. d/b/a Villas de Costa Dorada corporación constituida de conformidad a las leyes del Estado Libre Asociado de Puerto Rico, por ésta certifica:

**PRIMERO:** Que en reunión de la Junta de Directores y Accionistas de ésta corporación, celebrada el 31 de marzo de 2011, quedó resuelto solicitar la protección del Tribunal Federal de Quiebras con la radicación inmediata de una petición de reorganización corporativa de conformidad al Capítulo 11 del Código de Quiebras. La resolución adoptada por la Junta de Directores y Accionista fue como sigue:

*En el mejor interés de la Empresa se autoriza en presentar una petición de reorganización en conformidad al Capítulo 11 del Código Federal de Quiebras. De igual forma se autoriza a la Sr. Carlos R. Fernández Rodríguez, Presidente de la Corporación a que represente a esta en este proceso, incluyendo la contratación de los servicios profesionales necesarios para esta encomienda.*

EN TESTIMONIO DE LO CUAL, el aquí suscribiente certifica que los datos contenidos en esta resolución son ciertos, hoy 5 de abril de 2011.

  
Iris M. Cancel Lugo  
Secretario (a)



**UNITED STATES BANKRUPTCY COURT**  
**District of Puerto Rico**

In re Costa Dorada Apartments, Corp,  
 Debtor

Case No. \_\_\_\_\_

Chapter 11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
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Banco Popular de PR PO Box 366818 San Juan, PR 00936-6818	Banco Popular de PR PO Box 366818 San Juan, PR 00936-6818  www.bppr.com	Credit Line		99,034.10
Cooperativa A/C San Rafael PO Box 960 Quebradillas PR 00678	Cooperativa A/C San Rafael PO Box 960 Quebradillas PR 00678	Commercial Loan		157,682.00

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>

Parador Vista Mar Corp. Calle Emilio Gonzalez #900 ISabela PR 00662	Parador Vista Mar Corp. Calle Emilio Gonzalez #900 ISabela PR 00662	Related Company Advances	498,910.00
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Costa Dorada Beach Resort Calle Emilio Gonzalez #900 ISabela PR 0062	Costa Dorada Beach Resort Calle Emilio Gonzalez #900 ISabela PR 0062	Related Company Advances	2,758,811.00
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DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] named as debtor in this case, declare under penalty of perjury that I have read the foregoing LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS and that it is true and correct to the best of my information and belief.

Date May 10, 2011

Signature



CARLOS R FERNANDEZ RODRIGUEZ,  
President

In re Costa Dorada Apartments, Corp  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. Banco Popular Bankruptcy Department PO Box 362708 San Juan PR 00936-2708		Incurred: 2009 Lien: Mortgage Loan Security: Apartment 104B Costa Dorada Apartment				120,000.00	0.00
		VALUE \$ 250,000.00					
ACCOUNT NO. 159700687 SCOTIABANK DE PUERTO RICO INC AVENIDA PONCE DE LEON #273 HATO REY PR 00917	X	Incurred: 2003 Lien: First Mortgage Security: Commercial Building Located at State Rd 466 Bajuras Ward of Isabela, PR	X	X	X	1,100,400.72	0.00
		VALUE \$ 14,400,000.00					
ACCOUNT NO.							
		VALUE \$					
Subtotal > (Total of this page)						\$ 1,220,400.72	\$ 0.00
Total > (Use only on last page)						\$ 1,220,400.72	\$ 0.00

0 continuation sheets attached

(Report also on  
Summary of Schedules)  
(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

In re Costa Dorada Apartments, Corp  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

\*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.



**B6E (Official Form 6E) (04/10) - Cont.**

In re Costa Dorada Apartments, Corp  
Debtor

Case No. \_\_\_\_\_  
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*\* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

In re Costa Dorada Apartments, Corp,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet) Sec. 507(a)(8)

**Type of Priority for Claims Listed on This Sheet**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. 66-0530335 Compañía de Turismo PO Box 9023960 San Juan PR 00901		Consideration: Arbitrios 9%				Notice Only	Notice Only	Notice Only
ACCOUNT NO. 66-0530335 Corporacion Fondo Seguro Estado PO Box 365028 San Juan PR 00936-5028		Consideration: Workmens compensation				Notice Only	Notice Only	Notice Only
ACCOUNT NO. 66-0530335 CRIM PO BOX195387 San Juan PR 00936-5387		Consideration: Property Taxes				Notice Only	Notice Only	Notice Only
ACCOUNT NO. 66-0530335 Departamento de Hacienda PO Box 9024140 Oficina 424-B San Juan PR 00902-4140		Consideration: Employment witheld				Notice Only	Notice Only	Notice Only
Subtotal (Totals of this page)						\$ 0.00	\$ 0.00	\$ 0.00
Total (Use only on last page of the completed Schedule E.) Report also on the Summary of Schedules)						\$		
Totals (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$

Sheet no. 1 of 2 continuation sheets attached to Schedule of  
Creditors Holding Priority Claims

In re Costa Dorada Apartments, Corp,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet) Sec. 507(a)(8)

**Type of Priority for Claims Listed on This Sheet**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above..)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. 66-0530335 Department of Labor Edificio Prudencio Rivera Martinez 505 Muñoz Rivera Avenue San Juan PR 00919		Consideration: Disability & Unemployment				Notice Only	Notice Only	Notice Only
ACCOUNT NO. 66-0530335 Internal Revenue Services City View Plaza 2 48 Carretera 165 Suite 2000 Guaynabo PR 00968-8000		Consideration: 941PR & 940PR				Notice Only	Notice Only	Notice Only
ACCOUNT NO. 66-0530335 Municipio de Isabela PO Box 507 Isabela PR 00662-0507		Consideration: Municipality License (Patents)				Notice Only	Notice Only	Notice Only
ACCOUNT NO.								
Subtotal (Totals of this page)						\$ 0.00	\$	\$
Total (Use only on last page of the completed Schedule E.) Report also on the Summary of Schedules)						\$ 0.00		
Totals (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$ 0.00	\$ 0.00

Sheet no. 2 of 2 continuation sheets attached to Schedule of  
Creditors Holding Priority Claims

In re Costa Dorada Apartments, Corp  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 084-044268 Banco Popular de PR PO Box 366818 San Juan, PR 00936-6818		Incurred: 12-31-09 Consideration: Credit Line				99,034.10
ACCOUNT NO. Cooperativa A/C San Rafael PO Box 960 Quebradillas PR 00678	X	Consideration: Commercial Loan				157,682.00
ACCOUNT NO. Costa Dorada Beach Resort Calle Emilio Gonzalez #900 Isabela PR 0062		Consideration: Related Company Advances				2,758,811.00
ACCOUNT NO. Lcdo Manuel A Frau Catusus 606 Ave Tito Castro La Rambla Plaza Suite 125 Ponce PR 00716-0205		Consideration: Complaint Civil #ACD2009-0061 Foreclosure (Attorney for Scotiabank)				Notice Only
Subtotal						\$ 3,015,527.10
Total						\$

1 continuation sheets attached

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Costa Dorada Apartments, Corp,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		Consideration: Related Company Advances				498,910.00
Parador Vista Mar Corp. Calle Emilio Gonzalez #900 ISabela PR 00662						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. 1 of 1 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 498,910.00

Total &gt; \$ 3,514,437.10

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

Costa Dorada Apartments, Corp

In re

Debtor

Case No.

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: \_\_\_\_\_  
Debtor

Date \_\_\_\_\_

Signature: \_\_\_\_\_  
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

\_\_\_\_\_  
Address

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the President [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the Costa Dorada Apartments, Corp [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 16 sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date May 10, 2011Signature: CARLOS R FERNANDEZ RODRIGUEZ

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Banco Popular  
Bankrupcty Department  
PO Box 362708  
San Juan PR 00936-2708

Banco Popular de PR  
PO Box 366818  
San Juan, PR 00936-6818

Carlos Fernandez Rodriguez & Iris M. Cancel Lugo  
Calle Emilio González No. 900  
Isabela, PR 00662

Carlos Fernandez Rodriguez & Iris M. Cancel Lugo  
Calle Emilio González No. 900  
Isabela, PR 00662

Carlos Fernandez Rodriguez & Iris M. Cancel Lugo  
Calle Emilio González No. 900  
Isabela, PR 00662

Cooperativa A/C San Rafael  
PO Box 960  
Quebradillas PR 00678

Corporacion Fondo Seguro Estado  
PO Box 365028  
San Juan PR 00936-5028

Costa Doarada Beach Resort  
Calle Emilio Gonzalez #900  
Isabela PR 00662

Costa Dorada Beach Resort  
Calle Emilio Gonzalez #900  
Isabela PR 0062

CRIM  
PO BOX195387  
San Juan PR 00936-5387

Departamento de Hacienda  
PO Box 9024140  
Oficina 424-B  
San Juan PR 00902-4140

Department of Labor  
Edificio Prudencio Rivera Martinez  
505 Muñoz Rivera Avenue  
San Juan PR 00919

Internal Revenue Services  
City View Plaza 2  
48 Carretera 165  
Suite 2000  
Guaynabo PR 00968-8000

Lcdo Manuel A Frau Catasus  
606 Ave Tito Castro  
La Rambla Plaza Suite 125  
Ponce PR 00716-0205

Municipio de Isabela  
PO Box 507  
Isabela PR 00662-0507

Parador Vista Mar Corp.  
Calle Emilio Gonzalez #900  
ISabela PR 00662

SCOTIABANK DE PUERTO RICO INC  
AVENIDA PONCE DE LEON #273  
HATO REY PR 00917